BOOK REVIEWS

TEXTBOOK OF MEDICAL TREATMENT. By various authors. Edited by D. M. Dunlop, B.A. (Oxon.), M.D., F.R.C.P. (Edin.), M.R.C.P. (Lond.); L. S. P. Davidson, B.A. (Camb.), M.D., F.R.C.P. (Edin.), F.R.C.P. (Lond.); J. W. McNee, D.S.O., D.S.C., M.D. (Glas.), F.R.C.P. (Edin.), F.R.C.P. (Lond.). Fourth Edition. 1946. The Williams and Wilkins Company, Baltimore. Price \$8.00.

In a consideration of therapy of disease, it is axiomatic that both the disease process and the patient affected should be considered. This textbook of medical treatment by 30 British authorities is particularly thorough in exploring the latter, the management of the patient physically and mentally relative to his illness. As this aspect of therapeutics has been much neglected in our American texts on treatment, the British book would seem valuable to complement the American and to make up this deficit. Noteworthy consideration of general management of the patient is found in the sections on asthma, peptic ulcer, chronic rheumatic disease and heart disease. A careful evaluation of the position of psychiatry in general medicine is included.

Consideration of specific treatment suffers from the same disadvantage as in all major works on therapy, which can hardly be up to date when published in our present period of rapid advance. It is nevertheless distressing to find no mention of streptomycin, of folic acid therapy, of BAL in arsenic poisoning, of radio-active phosphorus in polycythemia vera and penicillin in treatment of agranulocytosis and Vincent's infection, to mention a few.

Typical British resistance to change is noted in continued advocation of purges in a variety of conditions and of such old remedies as cantharides blisters. In the section on cardiology are several recommendations which run contrary to experience in this country: e.g. the routine use of tincture of digitalis rather than more stable preparations, the intravenous administration of mecholyl, and the exhibition of quinidine in fixed dosage for days in auricular fibrillation in spite of lack of conversion to normal rhythm.

The book may be recommended, and chiefly for its well balanced attack on disease from all therapeutic aspects and for its elegant and most readable style throughout.

THE MANAGEMENT OF TUBERCULOSIS IN GENERAL HOSPITALS. By the Council on Professional Practice of the American Hospital Association. Paper edition 50 cents. Cloth \$1.00. Available through the American Hospital Association, 18 East Division Street, Chicago 10, Illinois.

This little booklet should be widely read by all those interested in hospital management. It is an attempt to present the latest knowledge and methods of the tuberculosis problem as it occurs in general hospitals. Unfortunately, there has been a tendency in recent years to eliminate the tuberculous patient or ex-patient from general hospitals on the ground that he serves as a source of infection to hospital personnel and other patients. Yet, the increasing tendency for phthisiologists is to use

collapse procedures which require hospitalization in general hospitals for a longer or shorter period. A factor which has made the problem more acute is the tendency to take routine x-ray films on all hospital admissions which brings to attention both active and healed tuberculosis. Occasionally the patients are ordered to leave at once. Cases have been reported to the reviewer of patients who have been given 24 hours to leave the hospitals on the basis of a positive x-ray diagnosis without an attempt being made to determine the presence or absence of positive sputum and the like.

The booklet under review points out how antiquated and impractical is such an attitude on the part of any hospital administration. It points out how tuberculosis patients may be admitted to general hospitals in such manner that hospital employees and other patients may be safeguarded from infection. Under Chapter 4, entitled "An Inclusive Outline for a General Hospital Control Program," the technique of isolation is described in detail. Certainly it should be realized by all concerned that tuberculous patients or ex-patients suffer ills to which flesh is heir, that they require surgical operations as often as anyone else and that they must be adequately provided for. The problem is urgent, the remedy is simple. It is to be hoped that the recommendations in this booklet will be widely applied by the majority of general hospitals.

INTRACRANIAL COMPLICATION OF EAR, NOSE AND THROAT INFECTIONS. By Hans Brunner, M.D., Associate Professor of Otolaryngology, University of Illinois College of Medicine, Chicago. Pp. 444. The Year Book Publishers, Inc., 304 South Dearborn Street, Chicago. 1946. Price \$6.75.

This book, as the title implies, is one which was written primarily for the specialist in otorhinolaryngology. It could possibly interest the neurologist or neurosurgeon only if he were concerned with the otolaryngologist's point of view. It is definitely not a treatise that would intrigue the general practitioner.

The book is divided into two sections. Section I includes the anatomy and physiology of the dura mater, the sinuses of the dura mater, the pia arachnoid, the intermeningeal spaces, the cerebrospinal fluid and the anatomic relationship between nasal and paranasal cavities and the brain.

Section II, clinical aspects, deals with inflammatory diseases of (1) the dura mater, (2) the dural sinuses (3) the leptomeninges, brain abscess and encephalitis.

The anatomy of the meninges and the sinuses of the dura mater with their important relations to the temporal bone, and to the nasal accessory sinuses and the nose is given in great detail and is probably the most valuable part of the book.

Of the congenital anomalies, the important naso-cephaloceles are described. Nothing is mentioned,